



Instruction Guide for Completing the BILLING COMPLIANCE REVIEW (BCR)

For School Divisions in the Commonwealth of Virginia

Virginia Department of Medical Assistance Services (DMAS)

Updated FY2019

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Overview

The Centers for Medicare and Medicaid (CMS) requires that interim Direct Service claims are submitted for all services that meet Medicaid requirements for which school divisions are seeking cost-based reimbursement through the cost report.

The MMIS (Medicaid Management Information System – claims processing system) provides for prompt eligibility verification, a complete audit trail from service to claim, and payment safeguards which insure that Medicaid only pays for covered services.

Medicaid and FAMIS cover the following health-related direct services provided by school division providers:

- Speech Language Pathology
- Occupational Therapy
- Physical Therapy
- Nursing
- Psychology
- Audiology
- Medical Evaluation
- Personal Care
- Specialized Transportation (*these services are not included in the BCR*)

School divisions must submit interim claims and receive payment for all services that meet DMAS requirements for which the school division has included costs in the cost report.

Billing Compliance Review (BCR)

The BCR is completed annually, with the Cost Report, as a way of excluding costs for services that were delivered, consistent with DMAS requirements, but for which claims were not submitted, or for which denied claims were not resubmitted.

The BCR requirement consists of accurately determining the population of Medicaid eligible students receiving Medicaid-covered services pursuant to an IEP that were provided by a Medicaid qualified practitioner and then randomly selecting 50 students (or all students if the population is less than 50) and determining the services provided to those students and the number of those services that were paid.

The results for the BCR will be used to calculate a “Claiming Percentage,” which is a ratio of the number of services paid through interim billing, divided by the number of billable services that were delivered.

The school division's Claiming Percentage is:

$$\frac{\text{\# of services \textbf{paid} (from interim billing)}}{\text{\# of billable services \textbf{delivered}}}$$

Example: $\frac{800 \text{ paid units}}{1000 \text{ delivered units}} = 80\% \text{ Claiming Percentage}$

Tracking Medicaid-Covered Services

School Divisions should track their Medicaid-covered services throughout the year to ensure compliance with the interim billing requirement. If you track this information during the year, you will be well prepared to complete the BCR:

For each Medicaid eligible student receiving IEP-prescribed Medicaid covered services, track

1. The services *delivered* out of the services *prescribed*.
2. The services *paid* out of the delivered services that were *billed*.



Tip: *Your Claiming Percentage is the number of qualified services paid out of the total number of qualified services delivered, so monitor your billing and make sure everything you bill is being paid, and denials are fixed and re-submitted if possible.*

Tools which help you monitor services are:

- Web-based Claims Monitoring provided by UMass (*see page 16 for additional information*)
- Remittance Advices provided by DMAS on the DMAS Web Portal

Billing Compliance Review Process

There are a number of steps necessary to complete the BCR. UMass has designed a web-based system that automates many of these steps for the school divisions. These are the steps you need to follow (detailed explanations of each step are later in this guide) -

1. Locate your December 1st child count.
2. Upload the child count list to the UMMS eligibility matching system (matching with the effective date of Quarter 2 of the fiscal year), using the same template as your division-wide match (discussed under eligibility section later).
3. From the resulting list of matched (Medicaid eligible) students, identify who had at least one Medicaid qualified service delivered within the fiscal year.
 - a. Make sure to include students with no parental consent!
4. Upload your students who had a Medicaid delivered service into the eligibility matching system again (this upload is not for matching purposes; this is the simplest way to load your BCR population into the system).

5. Log into the BCR system, pick the **last** list you uploaded (the one from step 4) with only the students who had Medicaid delivered services. This creates the BCR Population file in the BCR system.
6. Select a random sample of students (*system generated*)
7. Identify the delivered services (units) for each student that was randomly selected
8. Paid claims will automatically match to your delivered service units once you submit (*system automated*)
9. Claiming Percentage Calculation (*system automated*)

I. BCR Population

Confirming Medicaid Eligibility

The first step is to determine which students in your December 1 Special Education Child Count were Medicaid eligible **as of December 1st** of the fiscal year of the cost report.

A. Using the UMass Medicaid Eligibility Matching system

(Note: If your school division has not signed and fully executed a Data Security Agreement with UMass, refer to the Addendum on page 18.)

1. Compile an Excel list of students in your December 1st child count on the eligibility template.
2. Use the Eligibility Template please! The upload will not work without the exact template we provided to you. *(Note: Refer to the Instruction Guide for Medicaid Eligibility Matching for additional details about completing a match in the UMMS system).*
3. Include the following information

Column Headings/Titles:

A. Student Unique ID*	H. Address Line 1*
B. RID (Medicaid ID)	I. Address Line 2
C. Last Name*	J. City*
D. First Name*	K. State*
E. Middle Name	L. Zip code*
F. Date of Birth*	M. SPED* (valid values = 'Y', 'N')
G. Gender*	N. Optional
	O. Parental Consent (valid values = 'Y', 'N')**

* Required data element


** Parental Consent is only needed when uploading a BCR Population file

Tip: Name the file with a version number at the end of the file name for easy identification. We suggest using '88' to help identify your Child Count file. For example, SMM_SDVA_123456_2_2016_88.xls




Tip 2: If your school division system cannot provide student addresses, addresses can also be found from AAC division-wide match download report, which you probably have already completed (Refer to the Instruction Guide for Eligibility Matching for tips).

- Upload your list of students to **Quarter 2** of the fiscal year of the cost report and complete the match as normal. (*Note: For additional instructions regarding completing an eligibility match in the UMass system, please refer to the Instruction guide for Medicaid Eligibility Matching*).
- Complete the eligibility match, including matching your ‘duplicate’ and ‘possible’ student matches, and finalize the file.

File Name	Year	Qtr	Upload Date ▼	Status	Record Count	Download
SMM_SDVA_4981375_2_2016_99.XFR	2016	2	11/01/2016 12:46:15 PM	Finalized	122	



- Download the report for your matches (click the excel download button) and identify **all** special education students who -
 - had an IEP
 - which included Medicaid-covered services
 - which were delivered by a Medicaid qualified practitioner
 - for which your school division is including costs in the cost report
 - With **and Without** Parent Consent

File Name	Year	Qtr	Upload Date ▼	Status	Record Count	Download
SMM_SDVA_4981375_2_2016_99.XFR	2016	2	11/01/2016 12:46:15 PM	Finalized	122	



- Using the same template as above, add your students you just found who had at least 1 Medicaid qualified delivered service, and upload them again to the UMass eligibility site (*Note: this upload is not for matching purposes, this is for the BCR population only. For easy identification of your BCR Population file, we suggest naming your file with version number 99, for example: SMM_SDVA_123456_2_2016_99.xls*).

***Note:** When you use the eligibility matching system, all “technical difficulties” which can occur with formatting a BCR upload file (such as losing the leading zeroes on Medicaid ID numbers when the field isn’t properly formatted as a text field) won’t be an issue.

Now you’re ready to Login to the BCR

- Access your BCR in the Cost Report website hosted by UMass. The website link is:

<https://cbe-cr.chcf-umms.org>

**Only authorized users are given a User ID and password to access this information. If you are not currently an authorized user, an appropriate person from your school division will need to complete and sign a form to grant you access. Please contact UMass for more information.*

- Once logged in to the Cost Report website, access your BCR by clicking on the hyperlink under Billing Compliance Review on your dashboard. **Make sure you have selected the BCR for the correct Fiscal Year:**

Cost Report Dashboard

Show Finalized Reports

Drag a column header here to group by that column

School Division	Fiscal Year	Status	Billing Compliance Review Status	Last Updated	Last Updated User	Editing Period Deadline	Export
Emily BCR Training School	2017	Original	Initialized	6/26/2017 3:27 PM	AudetteE	10/17/2017	

Page 1 of 1 (1 items)

Be sure to select the BCR for the correct Fiscal Year

Click here

- Across the top of the page you will notice that the system tells you which step of the BCR process you are on. Right now, you're on step one - "BCR File Selection"

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DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

Cost Report | Billing Compliance

Billing Compliance Review

School Division: Fairfax County Public Schools Year: Deadline Management

BCR File Selection >> BCR Population >> Add Delivered Services >> Preliminary BCR Claim Percentage >> Final BCR Claim Percentage

- If you started with a Medicaid Eligibility Matching file in the UMass system, you will see a list of all matches completed in the system for Q2 of the correct fiscal year.

- Choose your '99' / last upload BCR population file from the list and click 'submit.'

BCR File Selection >> BCR Population >> Add Delivered Services >> Preliminary BCR Claim Percentage >> Final BCR Claim Percentage

#	FileName	Quarter	Upload date	Uploaded By
<input type="radio"/>	SMM_SDVA_4980697_2_2016_01_20161103080303.XFR	2	11/3/2016 12:00:00 AM	Audette, Emily
<input type="radio"/>	SMM_SDVA_4980697_2_2016_02_20161103083747.XFR	2	11/3/2016 12:00:00 AM	Audette, Emily
<input checked="" type="radio"/>	SMM_SDVA_4980697_2_2016_99_20161103084045.XFR	2	11/3/2016 12:00:00 AM	Audette, Emily

Page 1 of 1 (3 items)

Page size: 10

OR

Download Template

Upload a File: (Second Quarter Files Only)

Q2 Files Only

Browse

Submit

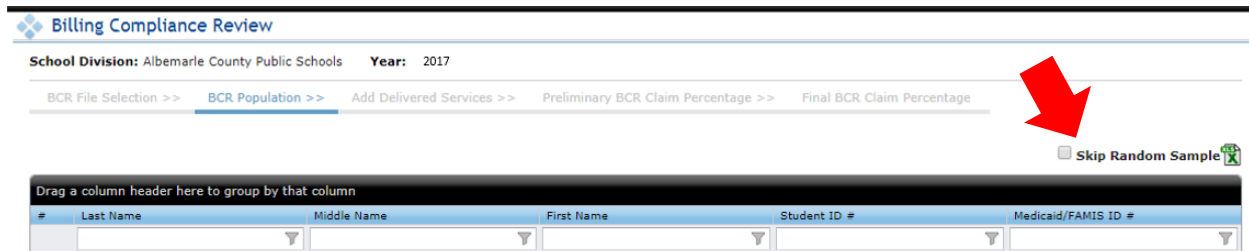
Version: 2.0.85.4 - 11/2/2016 4:56:12 PM

Home | Log Out

II. Generate Random BCR Sample

The next step is to generate a random sample of students from the BCR Population.


*You also have the option to forgo the sample, and enter services for all students, simply click the ‘*Skip Random Sample*’ box shown below, and all students will be selected.



Billing Compliance Review

School Division: Albemarle County Public Schools Year: 2017

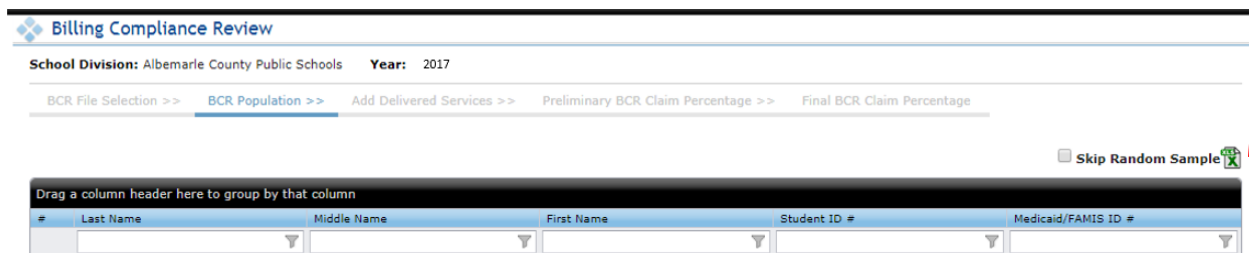
BCR File Selection >> **BCR Population >>** Add Delivered Services >> Preliminary BCR Claim Percentage >> Final BCR Claim Percentage

☐ Skip Random Sample 

Drag a column header here to group by that column

#	Last Name	Middle Name	First Name	Student ID #	Medicaid/FAMIS ID #


1. Prior to generating the random sample, you can export a copy of the entire list of students in your population if you wish to check it. Download the file by clicking on the Excel Export icon (*in the top right corner of the screen*).



Billing Compliance Review

School Division: Albemarle County Public Schools Year: 2017

BCR File Selection >> **BCR Population >>** Add Delivered Services >> Preliminary BCR Claim Percentage >> Final BCR Claim Percentage

☐ Skip Random Sample 

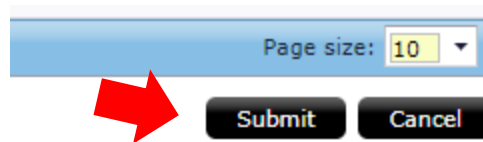
Drag a column header here to group by that column

#	Last Name	Middle Name	First Name	Student ID #	Medicaid/FAMIS ID #

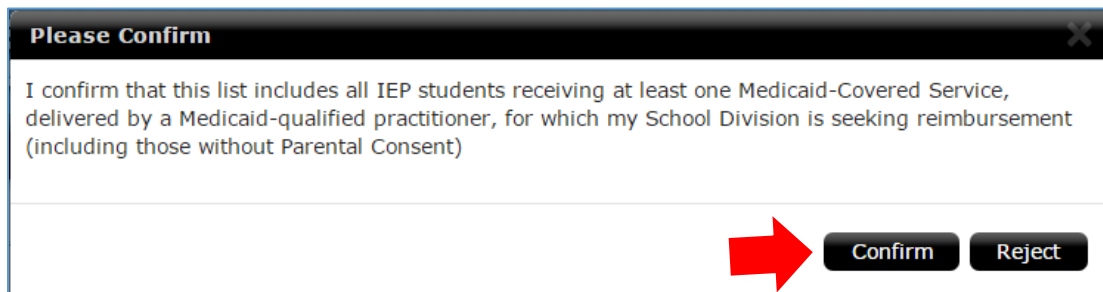
Example of Exported Population Report:

Last Name	Middle Name	First Name	Student ID #	Medicaid/FAMIS ID #
APPLE	G	ISABELLE	1	012345678901
BANANA	J	LILLIANN	2	012345678902
LETTUCE		MALYNDA	3	012345678903
MANGO	H	MICHAEL	4	012345678904
NECTARINE	M	SAMAIYA	5	012345678905
PEACH		ESTRELLA	6	012345678906
PUMPKIN		BRANDY	7	012345678907
QUINCE	T	ANDRE	8	012345678908
WATERMELON	E	ZAIRA	9	012345678909

2. Click ‘**Submit**’ (*bottom right corner*) to generate a random sample of 50 students for the BCR. If there are 50 or fewer students in your population, all students will be selected.



Click '**Confirm**' when the 'Please Confirm' message pops up on the screen:



III. Add Delivered Services

After the random list of students is generated, the number of Medicaid qualified services actually delivered to each student must be entered into the system, grouped by service type.

1. Add duplicate row(s) for students with multiple service types
2. Select service type for each student
3. Enter number of DMAS qualified delivered services per service type for each student
**Note: The maximum number of services that can be entered for any one service is 100.*

★ **Tip:** Enter the number of actual delivered services, not the number of services prescribed in the IEP.

A service is counted if:

1. Provider was Medicaid qualified
2. Costs for the provider are included in the cost report
3. Service is prescribed by the IEP (do not count services provided in excess of what is prescribed)
4. Service is a Medicaid-covered service
5. Include services even without Parental Consent
6. Include services even if not billed
7. Include services even if billed claim was not paid (EXCEPT for claims denied for Member not Eligible)

What services are included in the Delivered Service Count?

1. All services that meet DMAS requirements for billing.
2. Those services that would meet DMAS requirements but you DO NOT have parental consent to bill.
3. Evaluations are considered a billable service and must be included when the evaluation is referenced in the IEP or results in the service being added to an IEP.

- Services provided by contracted providers (except parentally placed private school or services paid for with federal dollars).
- Also remember, services measured in units, such as nursing, personal care, and psychological evaluations are captured by unit, not encounter.





What services are not included as delivered?

- Therapist meetings with adults (such as teachers, monitoring in the classroom, or providing a consult).
- When there is a last agreed upon IEP where the therapist does not believe the therapy takes the skill level of a qualified therapist.
- Parentally placed private school services.
- Services provided by a DMAS non-qualified provider (intern, etc.)
- Services provided by a DMAS qualified provider paid for with federal funds.
- Missed sessions.
- Services delivered for a period when the student became ineligible for Medicaid.
- Services delivered within the '30 Day Grace Period' by a Direct Service Provider.

Entering Delivered Services


You should be on the 'Add Delivered Services' step as shown by the progress status across the top of the page. From this page, you can export the information to an Excel workbook to work from while you're gathering the delivered services information for the randomly chosen students. Simply click on the Excel Export icon in the top right corner of the screen.





BCR File Selection >>		BCR Population >>	Add Delivered Services >>	Preliminary BCR Claim Percentage >>		Final BCR Claim Percentage	
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#	Student ID #	Last Name	First Name	Middle Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)
▶  	123	Apple	Amy	D	123456789102	YES
▶  	234	Banana	Betty		123456789103	YES













Steps to add delivered services:

- Click the 'plus' sign to the left of the student ID to open the service details entry box.







#	Student ID #
▶  	123
▶  	234





- Click the dropdown on 'Service Type' to select the service, and then click into the box under the 'Delivered Service Units' and enter the number of delivered service units for this service type for the student. The 'Comments' field is optional.

#	Student ID #	Last Name	First Name	Middle Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)
 	123	Apple	Amy	D	123456789102	YES
#	Service Type	Delivered Service Units	Comments			
 	<div><div></div><div>Audiology</div><div>Nursing</div><div>OT</div><div>Pers Care</div><div>Psych</div><div>PT</div><div>SPL</div></div>	Valid Values are 0 to 100				
 		Banana	Betty		123456789103	YES
 		Grape	Glenda	C	123456789104	YES
 		Peach	Paul		123456789105	YES
 		Pumpkin	Peter	H	123456789106	YES








- Click the 'green check mark' to save after you enter each service. This will save your work as you go through the student list so you can come and go out of the system as you please.

#	Student ID #	Last Name	First Name	Middle Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)
 	123	Apple	Amy	D	123456789102	YES
#	Service Type	Delivered Service Units	Comments			
 	PT	12	10 units del by J.Jones; 2 units del by S.Smith			
		Valid Values are 0 to 100				

- Proceed to the next student by clicking the 'plus sign' for the next student, and continue down the list of students in this manner.
- If a student received more than one type of service, click on the green 'plus sign' in the left hand column to create as many additional rows as needed for the student.

#	Student ID #	Last Name	First Name	Middle Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)
 	123	Apple	Amy	D	123456789102	YES
#	Service Type	Delivered Service Units	Comments			
 	PT	12	10 units del by J.Jones; 2 units del by S.Smith			
		Valid Values are 0 to 100				

- If you are working on adding your delivered services, and you realize that you needed to change the Medicaid ID or you want to change Parental Consent from Yes to No or No to Yes, all you have to do is click the 'Pencil' to next to the student ID, and you can edit those fields. Then just click the 'check mark' to save your changes.

#	Student ID #	Last Name	First Name	Middle Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)
  	123	Apple	Amy	D	123456789102	YES
 	234	Banana	Betty		123456789103	YES
 	456	Grape	Glenda	C	123456789104	YES

- After you have completed entering the delivered services for all students, 'Submit' to have the system match the delivered services to the paid claims data.

- Confirm that you're ready to complete the BCR match to paid claim data by clicking '**Confirm**' on the confirmation pop-up window.



Tip: Be extremely careful with the '**Cancel**' button! Clicking on Cancel will back you up one step in the process, and you will lose all work on the current step. So, if you realize that you have a student in your sample who didn't actually have any valid delivered services and you need to remove them from your BCR, you would click on 'Cancel' to back-up one step at a time until you are back to the beginning where you will remove the student from your BCR Population and start over. You will receive an additional pop up warning before you cancel!

IV. Match to Paid Claims Data

The system will automatically match your delivered services data against DMAS paid claims data and display the preliminary results. The DMAS paid claims data is updated monthly in the UMass system. You can continue to bill for services, which will be reflected in subsequent data updates. **Matched claim results are preliminary until the March claim file is processed and matched, then results become final.**

- Review your data to make sure it is accurate! From the '**Preliminary BCR Claim Percentage**' page, you can export and download a copy of this information to Excel by clicking on the Excel Export icon in the top right hand corner of the screen.

Student ID #	Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)	Service Type	Delivered Service Unit	Medicaid Units Paid	FAMIS Units Paid	Expansion Units Paid	Total Units Paid
12345	BOK CHOY		JAXSON	497041066050	YES	SPL	10	2	0	0	2
12346	BOYSENBERRY	D	ASANTA	497043453034	YES	SPL	8	0	0	0	0
12347	BOYSENBERRY	L	CEDRIC	497037820050	YES	PT	6	0	0	0	0
12347	BOYSENBERRY	L	CEDRIC	497037820050	YES	SPL	12	0	6	0	6
12348	No Par Consent	No Par Consent	No Par Consent	No Par Consent	NO	SPL	8	0	0	0	0

Example of the Exported file:

Student ID #	Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)	ServiceType	Delivered Service Unit	Medicaid Units Paid	FAMIS Units Paid	Expansion Units Paid	Total Units Paid
12345	BOK CHOY		JAXSON	497041066050	YES	SPL	10	2	0	0	2
12346	BOYSENBERRY	D	ASANTA	497043453034	YES	SPL	8	0	0	0	0
12347	BOYSENBERRY	L	CEDRIC	497037820050	YES	PT	6	0	0	0	0
12347	BOYSENBERRY	L	CEDRIC	497037820050	YES	SPL	12	0	6	0	6
12348	No Par Consent	No Par Consent	No Par Consent	No Par Consent	NO	SPL	8	0	0	0	0
12349	CABBAGE		DAVID	497028679036	YES	OT	6	8	0	0	8
12350	EGGPLANT		ABIGAIL	497018775066	YES	Psych	4	0	0	0	0
12351	ESCAROLE	M	JASMINE	497031365041	YES	SPL	6	9	0	0	9
12352	No Par Consent	No Par Consent	No Par Consent	No Par Consent	NO	SPL	12	0	0	0	0
12353	GREEN CABBAGE	V	SIMMONE	497049659033	YES	SPL	10	0	0	5	5
12354	GUAVA		OCTAVIA	497016475038	YES	SPL	6	3	0	0	3
12355	KUMQUAT	L	ETHAN	497014731041	YES	Nursing	30	0	0	0	0
12356	KUMQUAT	T	JASMINE	497034583031	YES	OT	6	0	0	0	0

Your preliminary Claiming Percentage is displayed at the bottom of the page, in the lower right hand corner.

0	0	0	0
52	6	26	84

Claiming Percentage: 33.33%

Home | Log Out

- After verifying that your delivered services data has been entered accurately, submit your BCR by clicking on '**Submit**' at the bottom of the screen.

0	0	0	0
52	6	26	84

Claiming Percentage: 33.33%

Home | Log Out

- Confirm your submission by clicking '**Confirm**' on the pop-up message window. Confirming this information will 'lock' your BCR submission and **you will not be able to make any changes without assistance from UMass.**

Please Confirm

Are you sure you want to submit the claiming percentage, after you confirm this will be read only screen and no edits will be possible

Tip: The top of the page now indicates that this is your 'Final BCR Claim Percentage' because it is locked and you cannot edit the delivered services data. However, remember that the percentage shown will continue to be updated automatically on a monthly basis as each monthly paid claims file is added to the system. The Claiming Percentage is not truly 'final' until after the March claim file has been added to the system.

Delivered Services >>

Preliminary BCR Claim Percentage <<

Final BCR Claim Percentage

First Name	Medicaid/FAMIS ID #	Parent Consent (YES/NO)	Service Type	Delivered Service Unit	Medicaid Units Paid	FAMIS Units Paid	Expansion Units Paid	Total Units Paid
AXSON	497041066050	YES	SPL	10	2	0	0	2
SANTA	497043453034	YES	SPL	8	0	0	0	0

Claiming Percentage Impact on Cost Settlement

The Claiming Percentage is defined as:

$$\frac{\text{\# of services paid (from interim billing)}}{\text{\# of billable services delivered}}$$

Example: $\frac{800 \text{ paid units}}{1000 \text{ delivered units}} = 80\% \text{ Claiming Percentage}$

The percentage of services delivered but not paid will reduce the cost settlement amount. The percentage is applied to the entire cost report. So in the example above, the total cost settlement will be reduced to 80% of what it potentially could have been.

It is the school division's responsibility to submit an accurate BCR. If your vendor assists you in completing the BCR, you must review it for accuracy!

Timelines

DMAS claims data used to match to the submitted delivered services information is updated in the UMass system monthly. Results are preliminary until the March claim file is processed and matched, then the results become final.

UMass will notify all divisions in July when their BCR's will be open. The BCR is due with your cost report by November 30th. All claims that meet timely filing requirements must be submitted/re-submitted by March 15th.

Resources

For assistance please e-mail VACostReport@umassmed.edu or call 1-800-535-6741.

Reviewing DMAS Claims Data

School divisions can monitor their claims activity through online reports available in the UMass system. To access the claims data, navigate to the 'Billing Compliance' dropdown menu, and click 'Review Claims'.



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DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

Cost Report ▾ Billing Compliance ▾

Review Claims

Cost Report Dashboard

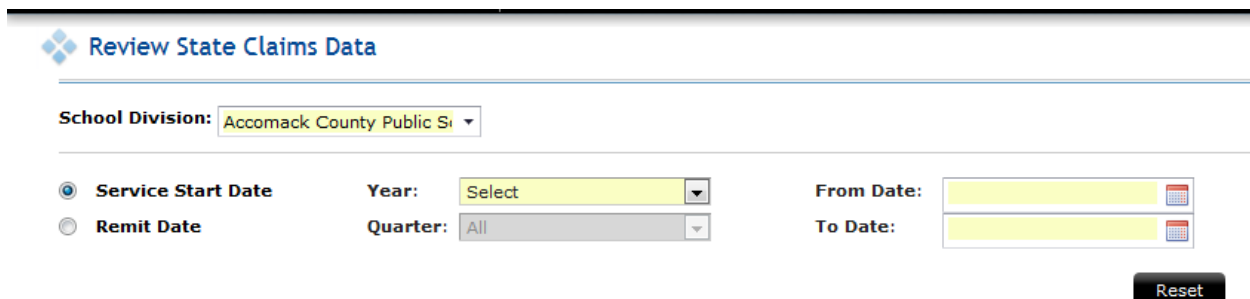
Show Finalized Reports

Drag a column header here to group by that column

School Division	Fiscal Year	Type	Status
-----------------	-------------	------	--------

Claims can be filtered by:

- Service Start Date
- Remit Date
- Fiscal Year
- Fiscal Quarter
- To and From dates down to a specific month/week/day



Review State Claims Data



School Division: Accomack County Public Si ▾

☒ Service Start Date Year: Select ▾ From Date:

☐ Remit Date Quarter: All ▾ To Date:

Reset

Data can be exported to an Excel workbook by clicking on the 'Excel Export' icon in the top right hand corner of the screen.

its	Paid Units	Denied Units	YTD Paid
3	3	3	3
3	3	3	3

Example of Exported Claims Monitoring Summary page:

Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Service Type	Billed Units	Paid Units	Denied Units	YTD Paid
CORN		ARRION	497076939090	SPL	3	3	0	3
CORN		DARIANA	497074689056	SPL	3	3	0	3
CORN	S	DAYANA	497029628058	SPL	8	8	0	8
CORN	S	DAYANA	497029628058	SPL	1	1	0	1
CORN	M	DREAM	497012528061	SPL	3	3	0	3
CORN		HAROLD	497029560038	SPL	3	3	0	3
CORN		IYANA	497056863042	Psych	1	1	0	1
CORN		IYANA	497056863042	Psych	7	7	0	7
CORN		KOBIE	497021653045	SPL	3	3	0	3
CORN	R	LARRY	497050200068	SPL	6	6	0	6
CORN	T	LEVI	497024912033	SPL	4	4	0	4
CORN	N	MEAH	497023666039	SPL	6	6	0	6

Use the filters across the top of the page to search for a particular student or service type.

#	Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Service Type	Billed Units	Paid Units	Denied Units	YTD Paid
1	GRANOLA					2	7	7	7
2	GRANOLA	E	BRAXTON	497040338061	SPL	11	11	11	11
3	GRANOLA		CELESTE	497010956043	SPL	10	10	10	10

Click on the Number shown in the 'Billed Units' column to open up a detail view of the claims billed for that student and service type.

#	Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Service Type	Billed Units	Paid Units	Denied Units	YTD Paid
1	GRANOLA					2	7	7	7
2	GRANOLA	E	BRAXTON	497040338061	SPL	11	11	11	11
3	GRANOLA		CELESTE	497010956043	SPL	10	10	10	10

Example of detail claim view:

State Claim Details											
Last Name	Middle Name	First Name	Medicaid ID #	Procedure Code	Start Date of Service	End Date of Service	Billed Amount	Paid Amount	Billed Units	Claim Status	Remit Date
GRANOLA		CELESTE	4970109	92508	03/07/2016	03/07/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	03/09/2016	03/09/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	03/10/2016	03/10/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	03/14/2016	03/14/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	03/16/2016	03/16/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92507	03/30/2016	03/30/2016	\$47.13	\$23.57	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	04/01/2016	04/01/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	04/11/2016	04/11/2016	\$15.55	\$7.78	1	Paid	06/03/2016
GRANOLA		CELESTE	4970109	92508	04/13/2016	04/13/2016	\$15.55	\$7.78	1	Paid	06/03/2016

The detail claim data for a particular student can also be exported to an Excel workbook by clicking on the Excel Export icon in the top right corner of the detail view page:

Billed Units	Claim Status	Remit Date
1	Paid	06/03/2016
1	Paid	06/03/2016
1	Paid	06/03/2016
1	Paid	06/03/2016

Example of Exported Detail Claim view page:

Last Name	Middle Name	First Name	Medicaid/FAMIS ID #	Procedure Code	Start Date of Service	End Date of Service	Billed Amount	Paid Amount	Billed Units	Claim Status	Remit Date
CORN	T	LEVI	497024912033	92508	11/17/2015	11/17/2015	15.55	10.11	1	Paid	6/17/2016
CORN	T	LEVI	497024912033	92508	12/4/2015	12/4/2015	15.55	10.11	1	Paid	6/17/2016
CORN	T	LEVI	497024912033	92508	10/7/2015	10/7/2015	15.55	7.78	1	Paid	6/10/2016
CORN	T	LEVI	497024912033	92508	10/14/2015	10/14/2015	15.55	7.78	1	Paid	6/10/2016


Addendum for SD's without a UMass Data Agreement-

Using the Xerox Reports for Eligibility Matching (skip this step if you used the UMass Eligibility Matching system to complete your match)

1. Start with your December 1st child count.
2. Utilize the Xerox reports to identify the Medicaid eligible students from the December 1st child count of the year of the cost report.
3. Create a file listing all the Medicaid/FAMIS eligible students who had at least 1 Medicaid delivered service found in the match using the provided BCR template which contains the following fields:
 - a. Medicaid/FAMIS ID
 - b. Last Name
 - c. First Name
 - d. Middle Name
 - e. Student ID
 - f. Parental Consent (YES or NO)
4. For all students for whom your school division doesn't have parental consent to bill Medicaid, you must indicate Parental Consent is 'NO' in the Parental Consent column. You must also redact their identifying information (Medicaid ID, Last Name, First Name, Middle Name, Student ID) and replace the information with 'dummy' information. The suggested replacement is shown in the sample below, where the Medicaid ID is replaced with a 'fake' number, the name information is replaced with 'No Parental Consent' and the Student ID is replaced with an identifier that will allow you to accurately enter delivered services for these students if they are selected for the BCR, but will not identify to anyone else who the students are. This can be accomplished by using 'Student A', 'Student B' etc.

Example Completed List of Matched Students:

Medicaid/FAMIS ID	Last Name	First Name	Middle Name	Student Id	Parental Consent
497043453034	BOYSENBERRY	ASANTA	D	12346	YES
497028679044	CABBAGE	ALYCIA		12347	YES
1234567890	No Parental Consent	No Parental Consent		Student A	NO
497031365041	ESCAROLE	JASMINE	M	12349	YES



After uploading this list to the BCR system, this is what the list will look like, with No Parental Consent student information redacted:

Drag a column header here to group by that column					
#	Last Name	Middle Name	First Name	Student ID #	Medicaid/FAMIS ID #
	Apple	A	Amy	32151	0123456789
	Banana		Barbara	65141	1234567890
	No Par Consent	No Par Consent	No Par Consent	52111	No Par Consent
	Lettuce	Lou	Lucy	51334	5678912311
	Mango	M	Marcy	32152	5678912312
	Nectarine	Ann	Nancy	32153	5678912313
	No Par Consent	No Par Consent	No Par Consent	32154	No Par Consent
	Pumpkin	P	Peter	32155	5678912315
	Watermelon		Wendy	32156	5678912316



Tip: The Student ID is going to be the only identifying information for students with No Parental consent, so enter something in that field that will identify the student to you so that you can accurately provide delivered services information if the student is chosen in the random sample – but this **must not be** the student's actual Student ID number.

4 **'Browse'** for your upload file on your PC and upload it to the BCR system. If you need the template for the upload file format, it can be downloaded from this screen as well.

Billing Compliance Review

School Division: Emily BCR Training School Year: 2016 ☐ Review State Claims Data > ☒ Billing Compliance Review

[BCR File Selection >>](#) [BCR Population >>](#) [Add Delivered Services >>](#) [Preliminary BCR Claim Percentage >>](#) [Final BCR Claim Percentage](#)

#	FileName	Quarter	Upload date	Uploaded By

No data to display

OR

Download Template

Upload a File: (Second Quarter Files Only)
Q2 Files Only

Browse

Submit

Version: 2.0.85.4 - 11/2/2016 4:56:12 PM Home | Log

5. After your BCR population file has been uploaded successfully, please go to page 8 of this instruction guide to generate a random sample of students.